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Effective on 12/08/2004.				Application Number 10/552 32/L-Conf. #8937			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Application Number 10/552,324-Conf. #8937 Filing Date October 7, 2005			
				Filing Date First Named Inv	and the second s	Hans LOIBNER	
For FY 2009				First Named Invi Examiner Name	***************************************	L. A. Bristol	
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit	1010		
TOTAL AMOUNT OF PAYMENT (\$) 65.00						4518-0111PUS1	
TOTAL AMOUNT OF PATMEN	Attorney Docket No. 4518-0111PUS1						
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH,							
	FILIN	IG FEES Small Entity	SEAF	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity	
Application Type	Fee (\$)		ee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							Small Entit
Fee Description Fee (\$) Fee (\$) Food claim over 20 (including Paissure)							
Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110							
Multiple dependent claims	i o (moradi	ing recipition,					390 195
• •				e Paid (\$) <u>Multiple Dependent Claims</u>			
2000000000000000000000000000000000000						e (\$)	
HP = highest number of total claim	ns paid for, if g	reater than 20.			***************************************		
Indep. Claims							
$\frac{3}{1000} - 3 \text{ or HP} = \frac{0}{1000} \times \frac{110.00}{1000} = \frac{0.00}{1000}$							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00							
SUBMITTED BY							
Signature		and the state of t		egistration No.	30,330	Telephone	(858) 792-8855
	Svenseo	n	I (A	attorney/Agent)	,		January 19, 2010
Name (Print/Type) Leonard R. Svensson Date January 19, 2010							